FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D



filing of a federal notice.

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPR	OVAL
OMB Number:	3235-007
xpires:	May 31, 200
stimated average	ge burden
lours per respor	nse 16.0

SEC USE ONLY					
Prefix	1	Serial			
D	ATE RECEIV	ED			

Name of Offering (check if this is an amendment and name has changed, and indicate change.) 2004 Series A Convertible Preferred Stock Private Offering	
Filing Under (check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment	Section 4(6) ULOF
A. BASIC IDENTIFICATION DATA	TO WED TO
Enter the information requested about the issuer	N1116 11 9 2004
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) StayOnline, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 120 Interstate North Parkway, Suite 408 Atlanta, GA 30339	Telephone Number (Including Area Code) 770-933-0600
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	
Brief Description of Business	
Wireless technology solutions for hotels	
Type of Business Organization ☐ limited partnership, already formed	NOV 0 5 2004
other (please specify): Thomson
☐ business trust ☐ limited partnership, to be found	FINANCIAL
Actual or Estimated Date of Incorporation or Organization: Month Year O 5 Actual or Estimated Date of Incorporation or Organization: Unisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbrevia CN for Canada; FN for other foreign jur	
GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D	or Section 4(6), 17 CFR 230 501, et seg., or 15
U.S.C. 77d(6).	(-),
When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given belowhich it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549	
Copies Required: <u>Five (5) copies</u> of this notice must be filed with the SEC, one of which must be manually sphotocopies of the manually signed copy or bear typed or printed signatures.	signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supposed not be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sale ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securiti be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exempt this form. This notice shall be filed in the appropriate states in accordance with the state law. The Appendix must be completed. ATTENTION	ies Administrator in each state where sales are to ion, a fee in the proper amount shall accompany
Failure to file notice in the appropriate states will not result in a loss of the federal exem	ption. Conversely, failure to file the
appropriate federal notice will not result in a loss of an available state exemption unless	· · · · · · · · · · · · · · · · · · ·

Managing Partner Keys, Robert L. Business or Residence Address (Number and Street, City, State, Zip Code) 4659 SW Macadam, Suite 100, Portland, Oregon 97239 Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/organing Partner Full Name (Last name first, if individual) Campbell, Thomas A. Business or Residence Address (Number and Street, City, State, Zip Code) 4265 San Felipe, Suite 700, Houston, Texas 77027 Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/organing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) 120 Interstate North Parkway, Suite 408 Atlanta, CA 30339 Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/organing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) 120 Interstate North Parkway, Suite 408 Atlanta, CA 30339 Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/organing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) 120 Interstate North Parkway, Suite 408 Atlanta, GA 30339 Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/organing Partner Full Name (Last name first, if individual) Medders, Christopher B. Business or Residence Address (Number and Street, City, State, Zip Code) 120 Interstate North Parkway, Suite 408 Atlanta, GA 30339 Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/organing Partner Full Name (Last name first, if individual) Tranche A Partners Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/organing Par			A. BASIC IDENTIF	ICATION DATA		
Each beneficial owner having the power to vote or dispose or direct the vote or disposition of, 10% or more of a class of equity securities of instance. Each general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply Promotor Beneficial Owner Executive Officer Director General and/Managing Partner of partnership issuers. Check Box(es) that Apply Promotor Beneficial Owner Executive Officer Director General and/Managing Partner of partnership issuers. Full Name (Last name first, if individual) Subsciences or Residence Address (Number and Street, City, State, Zip Code) 4659 SW Macadam, Suite 100, Portland, Oregon 97239 Check Box(es) that Apply Promotor Beneficial Owner Executive Officer Director General and/Managing Partner of State of City, State, Zip Code) 4650 San Felipe, Suite 700, Houston, Texas 77027 Check Box(es) that Apply Promotor Beneficial Owner Executive Officer Director General and/Managing Partner of Clast name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) 120 Interstate North Parkway, State 408 Adatata, GA 30339 Check Box(es) that Apply Promotor Beneficial Owner Executive Officer Director General and/Managing Partner of Clast name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) 120 Interstate North Parkway, State 408 Adatata, GA 30339 Check Box(es) that Apply Promotor Beneficial Owner Executive Officer Director General and/Managing Partner of Clast name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) 120 Interstate North Parkway, State 408 Adatata, GA 30339 Check Box(es) that Apply Promotor Beneficial Owner Executive Officer Director General and/Managing Partner of Clast name first, if individual) Tanache A Partners Business or Residence Address (Number and Street, City, State, Zip Code)	2. Enter the information i	requested for the fo	ollowing:			
Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/common Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/common Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/common Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/common Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/common Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/common Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/common Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/common Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/common Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/common Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/common Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/common Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/common Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/common Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/common Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director General and/common Check Box(es) that Apply: Promotor Beneficial Owner Executive Officer Director G	• Each promotor of the i	issuer, if the issuer	has been organized within the	past five years;		
Each general and munuging partner of partnership issuers. Check Box(es) that Apply:		having the power	to vote or dispose, or direct the	e vote or disposition of, 10%	or more of a class of	f equity securities of the
Check Box(es) that Apply:	Each executive officer	and director of cor	rporate issuers and of corporate	e general and managing partr	ners of partnership is	suers; and
Check Box(es) that Apply:	 Each general and mana 	aging partner of pa	rtnership issuers.			
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary)	Full Name (Last name first,	if individual)				
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30090173.01 2 of 8		(Use blank	sheet, or copy and use additio	nal copies of this sheet, as no	ecessary)	
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		j.			B. IN	FORMA'	TION AB	OUT OF	FERING					
1.	Has the iss	uer sold, or	does the is		d to sell, to also in Ap								Yes	No ⊠
2.	What is the	minimum	investment	that will	be accepted	d from any	y individu	al?					\$_1.00	
3.	Does the o	fering pern	nit joint ow	nership o	f a single u	nit?							Yes ⊠	No
4.	Enter the in commission offering. It with a state persons of	n or simila fa person to e or states,	r remuners o be listed list the nar	ation for is an associate of the l	solicitation ciated perso broker or c	of purch on or agen lealer. If	hasers in it of a brol more than	connection dead to the	on with sa aler registe persons to	ales of secred with to be listed	curities in he SEC and	the d/or		
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Bus	iness or Res	idence Add	ress (Numl	ber and St	reet, City,	State, Zip	Code)							
Nan	ne of Associ	ated Broke	r or Dealer										100.00	
State	es in Which (Chec	Person List k "All State											All States	
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate the columns below the amounts of the securities offered for exchange and already exchanged.		
		Aggregate	Amount
	Type of Security	Offering Price	Already Sold
		C.	œ.
	Debt	\$ \$_23,775,000	\$
		\$ <u>23,773,000</u>	5
	☐ Common ☑ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify: <u>LLC membership interests</u>)	\$	\$
	Total	\$ <u>23,775,000</u>	\$
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		N 1	Aggregate
		Number	Dollar Amount
	Accredited Investors	Investors 12	of Purchase \$ 2,012,500
		0	\$ 0
	Non-accredited Investors		-
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question. 1.		
		T f	Dallan Amazunt
		Type of Security	Dollar Amount Sold
	Type of offering	Security	Solu
	Rule 505	•	\$
	Regulation A		S
	Rule 504		\$
			5
	Total		2
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$80,000
	Accounting Fees		\$
	Engineering Fees Sales Commission (specify finders' fees separately)	∐ ⊠	\$ \$1,664,250
	Other Expenses (identify)	⊠ □	\$ <u>1,004,230</u> \$
	Total		\$ \$1,744,250
		KM	<u> </u>

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

30090173.01

		NUMBER OF INVESTORS, EXPENS	ES AN	ID USE OF PROCE	EDS	\$	
	b. Enter the difference between the aggregate Question I and total expenses furnished in resist the "adjusted gross proceeds to the issuer."	sponse to Part C – Question 4.a. This dif	ference	e		\$22,030	0,750
5.	Indicate below the amount of the adjusted gro used for each of the purposes shown. If the ar- estimate and check the box to the left of the es- equal the adjusted gross proceeds to the issuer above.	nount for any purpose is not known, furnistimate. The total of the payments listed r	sh an nust				
				Payments to			
				Officers,			
				Directors, & Affiliates		Payments Others	to
	Salaries and fees			\$		\$	
	Purchase of real estate			\$		\$	
	Purchase, rental or leasing and installation of	machinery and equipment		\$		\$	
	Construction or leasing of plant buildings and	facilities		\$		\$	
	Acquisition of other business (including the v offering that may be used in exchange for the pursuant to a merger)	assets or securities of another issuer	П	\$		\$	
	Repayment of indebtedness			\$		\$15,00	0.000
	Working capital			\$			0,750
	Other (specify):						3.12.F.R
				\$		\$	
	Column Totals			\$0	\boxtimes	\$22,030) <u>,750</u>
	Total Payments Listed (column totals added)			⋈ \$ <u>22,030</u>	0,750		
		D. FEDERAL SIGNATURE					
The sig	e issuer has duly caused this notice to be signed nature constitutes an undertaking by the issuer to ormation furnished by the issuer to any non-accordance.	by the undersigned duly authorized perso of furnish to the U.S. Securities and Exchanged investor pursuant to paragraph (b)	n. If the nge Co (2) of F	nis notice is filed und ommission, upon writ Rule 502.	er Rule 50 ten reque	05, the followir st of its staff, th	ig ic
[ss	uer (Print or Type)	Signature	V^-		Date		
Sta	yOnline, Inc.			\	Octobe	er 26, 2004	
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)			- A		
4 n	tonio DiMilia	President					

_ ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

30090173.01

		E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.2 of such rule?	ns Yes	No ⊠	
		See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby underta (17 CFR 239.500) at such times as requ	ikes to furnish to any state administrator of any state in ired by state law.	which this notice is filed, a notice	ce on Form D
3.	The undersigned issuer hereby understofferees.	ikes to furnish to the state administrators, upon written i	request, information furnished by	the issuer to
4.	e :	the issuer is familiar with the conditions that must be te in which this notice is filed and understands that the iss e conditions have been satisfied.		
	e issuer has read this notification and know authorized person.	ows the contents to be true and has duly caused this notic	e to be signed on its behalf by the	e undersigned
Issu	uer (Print or Type)	Signature	Date	
Sta	yOnline, Inc.			
Nai	me of Signer (Print or Type)	Title (Print or Type)		

President

Antonio DiMilia

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend non-ac investor	to sell to credited s in State —Item 1)	3 Type of security and aggregate offering price offered in State (Part C – Item 1)		Type of investor and amount purchased in State (Part C – Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ		X	Preferred Stock \$100.000	1	\$100,000	0	0		x
AR									
CA									
СО								<u> </u>	
CT									
DE									
DC									
FL			7 ()						
GA		X	Preferred Stock \$400,000	3	\$400,000	0	0		X
HI									
ID									
IL			Don france I Charle						
IN		X	Preferred Stock \$150,000	1	\$150,000	0	0		X
IA					,				
KS									
KY	·								
LA	······							**************************************	
MA									
MD									
ME									
MI									
MN									
МО									
MS									

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APPENDIX

1		2	3			4			5 lification	
	non-ac investor	to sell to ecredited rs in State 5 – Item 1)	Type of security and aggregate offering price offered in State (Part C – Item 1)		Type of investor and amount purchased in State (Part C – Item 2)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
MT										
NE										
NV										
NH										
NJ		X	Preferred Stock \$50,000	1	\$50,000	0	0		X	
NM										
NY		X	Preferred Stock \$75,000	1	\$75,000	0	0		X	
NC										
ND										
ОН										
OK										
OR		X	Preferred Stock \$512,500	1	\$512,500	0	0		X	
PA		X	Preferred Stock \$725,000	4	\$725,000	0	0		X	
RI										
SC										
SD										
TN										
TX										
UT										
VT										
VA										
WA										
WV										
WI										
WY										
PR										

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